



# MARYLAND Department of Health

Larry Hogan, Governor · Boyd Rutherford, Lt. Governor · Dennis Schrader, Secretary

## Letter of Intent Instructions - Round 2

Maryland §1115 HealthChoice Waiver Renewal

Evidence-Based Home Visiting Services (HVS) Pilot Funding Opportunity

### Introduction

As part of Maryland's HealthChoice §1115 Waiver, the State is offering local governments the opportunity to request matching federal funds for expansion of evidence-based home visiting services for high-risk pregnant women and children up to age 2 (HVS). Each HVS Pilot program will be managed locally by a lead local governmental entity (Lead Entity) that has the ability to fund fifty percent (50%) of total HVS Pilot costs with local dollars, provide leadership, and coordinate with key community partners to implement the Pilot. Each Lead Entity will be responsible for identifying other entities that will participate and provide services in the HVS Pilot (Participating Entities).

HVS Pilots will be effective starting from July 1, 2017, through December 31, 2021, and are expected to receive matching federal funding for the 4 ½ years duration of the waiver. Following the inaugural round of HVS Pilot funding, approximately \$2.5 million in matching federal funds are available annually, and when combined with the local non-federal share, pilot expenditures may total up to approximately \$5.1 million annually. HVS Pilots will be required to report on performance measures and share data for evaluation purposes in order to receive funding.

### Purpose of the Letter of Intent

The purpose of this Letter of Intent (LOI) is to assess prospective statewide interest in the HVS Pilot program, obtain preliminary Pilot design proposals, and provide an opportunity for potential applicants to submit questions. Submission of this LOI is voluntary and non-binding. Thus, failure to submit a LOI will not preclude a Lead Entity from applying to participate in the Pilot, and submission of an LOI does not require a Lead Entity's future participation in the Pilot program. MDH anticipates releasing the Request for Applications (RFA) for the HVS Pilot in January 2018, with applications being due 45 calendar days thereafter. The State would appreciate as much information as applicants are able to provide at the time of LOI submission.

### Eligibility for Funding

MDH will only accept applications for the HVS Pilots from Local Health Departments or other local government entities, such as a local management board. These government entities must serve as the Lead Entities for the HVS Pilots and have the capacity to provide the non-federal portion of medical assistance expenditures.

**Lead Entities should carefully review STC 29 ATTACHMENT D to ensure that all elements of their proposed pilot project are permissible according to pilot protocol.**

### Local Government Funding Requirements

Lead Entities will provide the necessary non-federal share of funds to MDH through an intergovernmental transfer (IGT). No State Medicaid funding match is available for the HVS Pilots. Upon



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MDH's receipt of the Lead Entity's IGT, MDH will transfer back to the Lead Entity the combined non-federal funds and its corresponding federal match. The Lead Entity will be responsible for the subsequent disbursement of funds to contracted Participating Entities, as specified in the HVS post-approval protocol. Further information will be described in the HVS Pilot application.

Lead Entities shall certify that the transferred funds qualify for federal financial participation, pursuant to 42 C.F.R part 433 subpart B, and are not derived from impermissible sources such as recycled Medicaid payments, federal money excluded from use as state match, impermissible taxes, and non-bona fide provider-related donations. Sources of non-federal funding shall not include provider taxes or donations impermissible under section 1903(w), impermissible IGTs from providers, or federal funds received from federal programs other than Medicaid (unless expressly authorized by federal statutes to be used for claiming purposes, and the federal Medicaid funding is credited to the other federal funding source). HVS Pilot payments are not considered patient care revenue. The payments shall not offset payment amounts otherwise payable by the local entity for beneficiaries, or supplant provider payments from the local entities.

MDH will provide funding to Lead Entities for home visiting services provided at a home visit rate. The per home visit rate(s) proposed by the Lead Entity in the RFA will be reviewed and approved by MDH. The home visit rate shall not exceed the amount expended by the Lead Entity for furnishing the direct service of the provider. The home visit rate will be developed based on a target cost per visit, adjusted for factors specific to the lead agency, such as the particular evidence-based practice, along with variables such as salary costs, type of visit, intensity of visit, and duration of visit or contracted evidence-based practice provider unit costs. Payment will be withheld if Lead Entities do not report required data to MDH in a timely and complete manner as outlined and agreed upon in applicable data use agreements.

## **Letter of Intent Submission Instructions**

Eligible entities that are interested in applying for funding for the HVS Pilot are strongly encouraged to submit a Letter of Intent to MDH by **December 22, 2017 at 5PM**. Letters of Intent must be submitted by the Lead Entity. The letter should be submitted via e-mail or e-mail attachment to [MDH.healthchoicerenewal@maryland.gov](mailto:MDH.healthchoicerenewal@maryland.gov). **The Letter of Intent should be no more than three pages long.** For more information or pilot resources, please visit the [HVS Pilot webpage](#).



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<b>HVS Pilot Letter of Intent Template</b>	
<b>1. Lead Entity Contact Information</b>	
	Provide the Lead Entity's name, mailing address, point of contact name, e-mail address, and telephone number.
<b>2. Lead Entity Eligibility for Funding</b>	
	Affirm that the Lead Entity is a Local Health Department or other local government entity, such as a local management board, and is permitted to participate in the financing of the non-federal portion of medical assistance expenditures through an intergovernmental transfer (IGT) process.
<b>4. Target Population and Geographic Area</b>	
	Describe the geographic area in which the HVS Pilot would operate, and the target population(s).
<b>5. Project Plan</b>	
	Provide a brief project summary describing your current home visiting program and plan for expansion through the HVS Pilot. Specify how many families are currently served by your home visiting program and how many additional families will be served if your application for the HVS Pilot is successful. Note whether home visiting services will be provided by a contracted entity or local health department.
<b>6. Participating Entities</b>	
	Describe the other organizations that you are planning to work and/or coordinate with in implementing your pilot program, such as Maryland's Managed Care Organizations. Describe the roles and functions that the Participating Entities will perform.
<b>7. Budget</b>	
	Please affirm that you are able to develop a per home visit rate. Provide information on the estimated federal funding request and source(s) of your local match dollars.
<b>8. Questions (not included in the three page limit)</b>	
	Please include any questions you may have for MDH about the HVS Pilot program. Responses to selected questions will be added to the HVS Pilot Frequently Asked Questions document and posted on the MDH website.